



<b><u>OFFICE USE ONLY</u></b>	
Receipt #:	_____
Amount:	_____

**OKLAHOMA DEPARTMENT OF AGRICULTURE, FOOD & FORESTRY**  
 PHONE: 405-522-6141      EMAIL: icvi@ag.ok.gov      FAX: 405-522-0756

## ELECTRONIC RFID TAGS ORDER FORM

**Shipto:** Veterinarian or Producer: \_\_\_\_\_  
 Clinic Name if applicable: \_\_\_\_\_  
 Fed Ex Delivery Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Phone Number : \_\_\_\_\_  
 Premise ID Number: **(Required)** \_\_\_\_\_  
 National Accreditation Number (for veterinarians): \_\_\_\_\_

Mailing Address (for receipt): \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_

**Email Address to send tag recording spreadsheet:** \_\_\_\_\_

ITEM	COST	# of TAGS	
OCV (orange) TAGS (veterinarians only)	FREE		\$00.00
ID TAGS	FREE		\$00.00

### **SHIPPING and HANDLING COSTS**

	<b>\$10.00 for every 1000</b>		\$
	\$10.00 Minimum Charge		
Pick up at ODAFF office	N/C		\$00.00
<b>Tags are for Replacement CATTLE ONLY Total</b>			\$

- Visa                     
  MasterCard                     
  Discover(+3)

Card Number: \_\_\_\_\_  
 Expiration Date: \_\_\_\_\_